

## FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 910.00

|   | Complete if Known    |                        |  |  |  |
|---|----------------------|------------------------|--|--|--|
|   | Application Number   | 10/080,057             |  |  |  |
|   | Filing Date          | February 20, 2002      |  |  |  |
|   | First Named Inventor | Chang Chul Ha          |  |  |  |
|   | Examiner Name        | Elizabeth Marie Keaney |  |  |  |
|   | Art Unit             | 2882                   |  |  |  |
| _ | Attorney Docket No.  | 23976-08191            |  |  |  |

| Code          | METHOD OF PAYME                 | FEE CALCULATION (continued)           |            |            |         |  |   |          |  |
|--|---------------------------------|---------------------------------------|------------|------------|---------|--|---|----------|--|
| Deposit Account Name   |                                 | 3. AC                                 |            |            |         |  |   |          |  |
| Code   (\$)   Code   (\$)   Code   (\$)   Code   (\$)   Code   (\$)   Code   (\$)   Charge fee(s) indicated below   Credit any overpayments   Charge fee(s) indicated below   Credit any overpayments   Code   Co | Deposit Account Number 19-2555  |                                       |            | Entity     | Small   | Small Entity Fee Description                           |   | Fee Paid |  |
| Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this under 37 CFR §1.16 or §1.17 during the pendency of this polication   Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.   1804   920*   1804   920*   1804   920*   1805   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*   1,840*           | Deposit Account Name            |                                       |            |            |         |  |   |          |  |
| Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application   |                                 |                                       |            |            |         |  |   |          |  |
| Marker 37 CFR §1.16 or §1.17 during the pendency of this application   1812   2,520   1812   2,520   For filling a request for ex parte reexamination   1816   1840   1804   1        | 1 = * ''                        |                                       |            |            |         |  |   |          |  |
| Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.   | under 37 CFR §1.16 or §         |                                       |            |            |         | •  |   |          |  |
| Tell   Description   Substitution        | ·                               | 1804                                  | 920*       | 1804       | 920*    | Requesting publication of SIR prior to Examiner action |   |          |  |
| 1. BASIC FILING FEE   Large Entity   Small Entity   Fee   Fee   Fee   Description   Fee Paid   1253   1020   2253   510   Extension for reply within second month  |                                 | 1805                                  | 1,840*     | 1805       | 1,840*  | Requesting publication of SIR after Examiner action    |   |          |  |
| Large Entity   Small Entity   Fee        | FEE CA                          | LCULATION                             | 1251       | 120        | 2251    | 60   | Extension for reply within first month      | 120      |  |
| Pee   Fee        | 1. BASIC FILING FEE             |                                       |            |            | 1       |  |   |          |  |
| 1255   2,160   1       | 1 ' '                           |                                       |            |            |         |  | • •   |          |  |
| 1401   500   2401   250   Notice of Appeal   1402   500   2402   250   Filling a brief in support of an appeal   1401   1451   1,510   1,510   1,510   1,510   1,510   1,510   1,510   1       |                                 | Fee Description Fee Paid              |            | •          |         | •  | •   |          |  |
| 1402   500   2402   250   Filing a brief in support of an appeal   1403   1000   1451   1,510        | Code (\$) Code (\$)             |                                       |            | •          |         |  | •     |          |  |
| 1403 1000   2403 500   Request for oral hearing  |                                 |                                       |            |            |         |  | • •   |          |  |
| SUBTOTAL (1) (\$) 1451 1,510 1451 1,510 Petition to institute a public use proceeding  SUBTOTAL (1) (\$) 1452 500 2452 250 Petition to revive - unavoidable  2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE:  Extra claims  Fee Free  Fee Free  Fee Free  Total Claims  1 20 20 20**= 0 X   |                                 |                                       |            |            |         |  |   |          |  |
| SUBTOTAL (1)   (\$)   1452   500   2452   250   Petition to revive - unavoidable   1453   1,500   2453   750   Petition to revive - unintentional   1453   1,500   2453   750   Petition to revive - unintentional   1453   1,500   2453   750   Petition to revive - unintentional   1453   1,500   2453   750   Petition to revive - unintentional   1453   1,500   2453   750   Petition to revive - unintentional   1453   1,500   2453   750   Petition to revive - unintentional   1453   1,500   2453   750   Petition to revive - unintentional   1453   1,500   2453   750   Petition to revive - unintentional   1453   1,500   2453   750   Petition to revive - unintentional   1453   1,500   1453   1,500   2501   1,000   1,00      |                                 |                                       |            |            |         |  |   |          |  |
| SUBTOTAL (1)   (\$)   1453   1,500   2453   750   Petition to revive - unintentional   |                                 |                                       |            | •          |         | •  | , , ,                                       |          |  |
| Total Claims   20  | SUBTOTAL (1) (\$)               |                                       |            |            |         |  |   |          |  |
| Total Claims    20   -20***   0  | 2. EXTRA CLAIM FEES             | FOR UTILITY AND REISSUE               | 1501       | 1,400      | 2501    | 700  | Utility issue fee (or reissue)              |          |  |
| Independent Claims    Submission of Information Disclosure Stmt   Submission after final rejection (37 CFR 1.129(a))   Submission after final rejection (37 CFR 1.129(a))   Submission after final rejection (37 CFR 1.129(b))   Submission of Information Disclosure Stmt   Submission after final rejection (37 CFR 1.129(a))   Submission after final rejection (37 CFR 1.129(b))   Submission after final rejection (37 CFR 1.129(b))   Submission of Information Disclosure Stmt   Submission after final rejection (37 CFR 1.129(a))   Submission after final rejection (37 CFR 1.129(b))   Submission of Information Disclosure Stmt   Submission after final rejection (37 CFR 1.129(b))   Submission of Information Disclosure Stmt   Submission after final rejection (37 CFR 1.129(b))   Submission after final rejection (37 CFR 1.129(b))   Submission of Information Disclosure Stmt   Submission after final rejection (37 CFR 1.129(b))   Submission after final rejection (37 CFR 1.129(b))   Submission of Information Disclosure Stmt   Submission after final rejection (37 CFR 1.129(b))   Submission after final rejection (37 CFR 1.129(b     | Extra                           |                                       | 1502       | 800        | 2502    | 400  | Design issue fee                            |          |  |
| Claims  Multiple Dependent  Large Entity Small Entity Fee Fee Fee Code (\$)  Code (\$)  Claims in excess of 20  1809 790 2809 395 Filing a submission after final rejection (37 CFR 1.129(a))  1201 200 2201 100 Independent claims in excess of 3  1810 790 2810 395 For each additional invention to be examined (37 CFR 1.129(b))  1203 360 2203 180 Multiple dependent claim, if not paid 1204 200 2204 100 **Reissue independent claims over original patent  SUBTOTAL (2) (\$) 0  1807 50 1807 50 Processing fee for Provisional Applications  1808 180 180 Submission of Information Disclosure Stmt  1806 180 Submission of Information Disclosure Stmt  1807 790 2809 395 Filing a submission after final rejection (37 CFR 1.129(a))  1808 790 2809 395 For each additional invention to be examined (37 CFR 1.129(b))  1809 790 2810 395 For each additional invention to be examined (37 CFR 1.129(b))  1809 790 2801 395 Request for Continued Examination (RCE) 790  1800 900 1802 900 Request for expedited examination of a design application  Other fee (specify)  SUBTOTAL (2) (\$) 0   | Total Claims 20 -20**=0         | x = 0                                 | 1503       | 1100       | 2503    | 550  | Plant issue fee                             |          |  |
| Large Entity Fee Fee Fee Code (\$)  1202 50 2202 25 Claims in excess of 20  1201 200 2201 100 Independent claims in excess of 3  1203 360 2203 180 Multiple dependent claims, if not paid 1204 200 2204 100 **Reissue independent claims over original patent 1205 50 2205 25 **Reissue claims in excess of 20 and over original patent 1205 (\$) 0 **SUBTOTAL (2) (\$) 0 **SUBTOTAL (2) (\$) 0 **SUBTOTAL (2) (\$) 0 **SUBTOTAL (3) (\$) 910.00   | Claims 3 -3" = 0                |                                       |            | _          |         |  |   |          |  |
| Fee Fee Fee Fee Fee Code (\$) Claims in excess of 20  1202 50 2202 25 Claims in excess of 20  1201 200 2201 100 Independent claims in excess of 3  1203 360 2203 180 Multiple dependent claims, if not paid 1204 200 2204 100 **Reissue independent claims over original patent*  SUBTOTAL (2) (\$) 0  8021 40 8021 40 Recording each patent assignment per property (times number of properties)  1809 790 2809 395 Filing a submission after final rejection (37 CFR 1.129(a))  1810 790 2810 395 For each additional invention to be examined (37 CFR 1.129(b))  1801 790 2801 395 Request for Continued Examination (RCE)  790 1802 900 Request for expedited examination of a design application  Other fee (specify)  SUBTOTAL (2) (\$) 0  | Multiple Dependent              | =                                     | 1807       | 50         | 1807    | 50   | Processing fee for Provisional Applications |          |  |
| Code (\$) Code (\$) Code (\$)  | ,                               |                                       |            |            |         |  |   |          |  |
| 1201   200   2201   100   Independent claims in excess of 3   1810   790   2810   395   For each additional invention to be examined (37 CFR 1.129(b))   1203   360   2203   180   Multiple dependent claim, if not paid   1801   790   2801   395   Request for Continued Examination (RCE)   790   1802   900   1802   900   Request for expedited examination of a design application   2205   25   **Reissue claims in excess of 20 and over original patent   300   395   Request for Continued Examination (RCE)   790   1802   900   1802   900   Request for expedited examination of a design application   2205   250          | Code (\$) Code (\$)             | Fee Description                       | <u>.</u> . |            |         | -  | (times number of properties)                |          |  |
| 1203 360 2203 180 Multiple dependent claims in excess of 20 2204 100 **Reissue independent claims over original patent **Reissue claims in excess of 20 and over original patent **SUBTOTAL (2) (\$) 0   1801 790 2801 395 Request for Continued Examination (RCE) 790 1802 900 Request for expedited examination of a design application **Other fee (specify) **Subtotal (2) (\$) 0   SUBTOTAL (2) (\$) 0   SUBTOTAL (3) (\$) 910.00   |                                 |                                       |            |            |         |  | (37 CFR 1.129(a))                           |          |  |
| 1204 200   2204 100 **Reissue independent claims over original patent   1802 900   1802 900   Request for expedited examination of a design application   1802 900   1802 900   Request for expedited examination of a design application   Other fee (specify)   Subtotal (3) (\$) 910.00   |                                 | •                                     |            |            |         |  | (37 CFR 1.129(b))                           |          |  |
| 1205 50 25 **Reissue claims in excess of 20 and over original patent  SUBTOTAL (2) (\$) 0  SUBTOTAL (3) (\$) 910.00  |                                 | Multiple dependent claim, if not paid |            |            |         |  | •   | 790      |  |
| SUBTOTAL (2) (\$) 0 SUBTOTAL (3) (\$) 910.00   | 1204 200 2204 100               | •                                     | 1802       | 900        | 1802    | 900  |   |          |  |
|  | 1205 50 2205 25                 | Other fee (specify)                   |            |            |         |  |   |          |  |
|  | SUBTOT                          | SUBTOTAL (3) (\$) 910.00              |            |            |         |  |   |          |  |
|  | or number previously paid, if g | •Reduc                                | ed by Basi | c Filing F | ee Paid | , , <u>, , , , , , , , , , , , , , , , , </u>          |   |          |  |

| SUBMITTED BY Complete (if applicable) |                 |                                      |        |      |                          |  |  |  |  |
|---------------------------------------|-----------------|--------------------------------------|--------|------|--------------------------|--|--|--|--|
| Name (Print/Type)                     | Robert A. Hulse | Registration No.<br>(Attorney/Agent) | 48,473 |      | Telephone (415) 875-2444 |  |  |  |  |
| Signature                             | Clart A. IN     |                                      |        | Date | April 28, 2005           |  |  |  |  |